4		CLAIMS	AS FILED - PART	1			***************************************	Printer designation
	Western Commission of the Comm		(Column 1)	(Column 2)	8MALL EN Type	TITY	QR	HTO.
	J.B. NATIONAI	L STAGE FEES			FLATE	FEE	7	RATE
8	Basic fee		SMALL ENT. # \$ 160	LARGE ENT. = \$ 800	BASIO FEE	-	100	BASIO FEE
. €	A HOLLYHİMAX	EE	Satisfies POT Article 33(1) (4) • \$ 50 (1 100	All other altuntions = # 100 / # 200	EXAM, FEE		1	
8	EARCH FEE		U.G. is ISA = \$ 50/\$ 100 ALL other countries = \$ 200/\$ 400	All other altuations = 1 250 / \$ 500	SEAROH FEE			EXAM. FEE SEAROH FEE
FI	E FOR EXTRA	SPEO. PGS.	minus 100 =	160 ±	X \$ 125 =		1 1	X \$ 250 =
TO	TAL OHARGEA	VBLE CLAIMS	minus 20 =	1	X \$ 25 =		OR	X \$ 50 =
	DEPENDENT C	·	= B sunlm	•	X \$ 100 =		OR	X \$ 200 =
-		IDENT CLAIM PRI	•		+\$ 180 =		OR -	+ \$ 360 =
1	. •	•	less than zero, enter *0 AMENDED - PART	• •	TOTAL		OR	TOTAL
-	7-16-0	(Column 1)	(Colum	n 2) -(Column 3) .	8MALL EN	πτ	O R	OTHER!
A H		REMAINING AFTER AMENDMENT	HIGHE MUMUII PREVIOL PAID FI	PRESENT EXTRA	RATE 1	ADDI: 10NAL FEE	1	RATE .
MENDACENT	Total	106	Minus ** (D)	(a) =	X \$ 25 =		OR 3	= 03 \$
15	Independent			0 "	X \$ 100 =	0	RX	\$ 200 -
12	FIRST PRES	entation of Mi	altiple dependent cl	AIM 🔲	+ \$ 180 ==	. 0	R +	\$ 360 e
					TOTAL ADDIT.			

ENTB		REMAINING AFTER AMENDMENT		HUNGER PREVIOUSLY PAID FOR	PRESENT EXTRA
8	Total	•	Minus	44	i
Ante	Independent	•	Minus	ASA	E
	FIRST PRES				

PATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X \$ 25 =		or	X \$ 50 =	·
X \$ 100 =		QR	X \$ 200 =	:
+\$ 180 =		OR	+ \$ 860 =	
TOTAL ADDIT.		OR	TOTAL Abbit.	

If the entry in column 1 is less than the entry in column 2, writis "0" in column 3.

If the Highest Number Previously Faid For" IN THIS SPACE is less than "20", enter "20",

If the Highest Number Previously Paid For" IN THIS SPACE is less than "5", enter "3".

This "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.